## PATENT APPLICATION FEE DETERMINATION RECORD Effective December 8, 2004

Application or Docket Number

	CLAIMS AS FILED - PART I							19/3/1869						
	ILS NATION	IAL STAGE FEI	((	Column 1)	(Column 2)		SMALL	ENTITY	3	OR	OTHER THAN SMALL ENTITY		 [	
		WE STAGE FEI	EŞ				RATE	F	E	ſ			_	
	BASIC FEE		SMALI	L ENT. = \$ 150	LARGE.ENT. = \$ 300		BASIC FEE			-	RATE	FE	E	
	EXAMINATION	FEE	(4) =	PCT Article 33(1)- \$ 50 / \$ 100	All other situations \$ 100 / \$ 200	1	EXAM FEE		-1'	ŀ	BASIC FEE	30	)	
	SEARCH FEE		ALLon	A = \$50/\$100 er countries = 00/\$400	All other situations \$ 250 / \$ 500	-	SEARCH FI		$\dashv$	ŀ	XAM FEE	26	b	
	FEE FOR EXTRA SPEC. PGS.			minus 100 =	/50 =				4	s	EARCH FEE	40		
	TOTAL CHARG	EABLE CLAIMS	23	minus 20 = .	3		X \$ 125 X \$ 25 =				X \$ 250 =	:	brack	
ŀ	INDEPENDENT CLAIMS		3	minus 3 = .			X \$ 100		$\dashv^{\circ}$		X \$ 50 =	157		
٨	MULTIPLE DEPI	ENDENT CLAIM	PRESENT				<b></b>		J°	OR X\$200		=		
F	If the differen	ce in column 1	is less than z	ero, enter "0"	in column 2		+ \$ 180 :	1	Jo	R 🛂	<b>\$</b> 360 =		7	
							TOTAL		0	R	TOTAL	1052		
	CLAIMS AS AMENDED - PART II  (Column 1)  (Column 2)  (Column 2)  (Column 3)												7	
<b> </b>	<del></del>	(Column 1)		(Column 2) (Column 3)			SMALL	ENTITY	OR	₹	OTHER SMALL E	THAN Entity		
5		REMAINING AFTER AMENDMENT		NUMBE PREVIOUS PAID FO	R PRESENT SLY EXTRA		RATE	ADDI- TIONAI			RATE	ADDI- TIONAL	1	
AMENDMENT	Total	• 23	Minus	- 20	= _	1	X \$ 25 =	FEE	OR	<b> </b>		FEE	1	
¥		· 3	Minus	2	=	1	X \$ 100 =		OR	12	\$ 50 = \$ 200 =		-	
L	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							<del>                                     </del>	7	<u> </u>			L	
						<i>]</i> [	+ \$ 180 = TOTAL ADDIT.		OR		360 = ALADDIT.			
		(Oat 4)					FEE		OR		FEE			
		(Column 1)	<del></del>	(Column 2	,									
SNT B	,	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSL PAID FOR	PRESENT Y EXTRA		RATE	ADDI- TIONAL		R	ATE	ADDI- TIONAL		
NDMENT	Total	• .	Minus	**	a		X \$ 25 =	FEE	OR		50-	FEE		
AME	independent	•	Minus	***	. =	ŀ	X \$ 100 =		ŀ		50=			
	FIRST PRESENTATION OF MULTI		ULTIPLE DEP	ENDENT CLAI	м				OR		200 =			
		+ \$ 180 = OTAL ADDIT.		OR		360 = . ADDIT.								
			FEE L		OR		EE							
***	If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "20", enter "20".  If the "Highest Number Previously Paid For" IN THIS SPACE is less than "3", enter "3".  The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.													